

UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.	520.43569X00	
		First Inventor	Takashi OSHIMA et al.	
		Title	VARIABLE GAIN AMPLIFIER CIRCUIT AND GAIN CONTROL METHOD THEREOF	
		Express Mail Label No.		
(Only for new nonprovisional applications under 37 CFR 1.53(b))				
APPLICATION ELEMENTS		Mail Stop Patent Application Commissioner for Patents POB 1450 Alexandria, Virginia 22313-1450		
SEE MPEP chapter 600 concerning patent application contents.		ADDRESS TO:		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission if applicable, all necessary		
3. <input checked="" type="checkbox"/> Specification [Total Pages: 35] -Descriptive title of the invention (or title page) -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies		
4. <input checked="" type="checkbox"/> Formal Drawing(s) (35 U.S.C. 113) [12 Shts.: Figs 1-22]		ACCOMPANYING APPLICATION PARTS		
5. Oath or Declaration [Total Pages: ____] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) ii. <input checked="" type="checkbox"/> FILED WITHOUT DECLARATION		9. <input type="checkbox"/> Assignment(s)/Recordation Cover Form(s) PTO-1595 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) (In Declarations) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of Refs. Statement (IDS)/PTO-1449 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)/Claim (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Form PTO-2038 (Fee Code 1001)		
6. <input type="checkbox"/> Application Data Sheet (See 37 CFR §1.76)				
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.				
Prior application information: Examiner: Group Art Unit: Confirmation No.:				
CONTINUATION/DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.				
19. CORRESPONDENCE ADDRESS				
<input checked="" type="checkbox"/> Customer No./Bar Code Label		020457 (Insert Customer No/Attach bar code label here)		or <input type="checkbox"/> Correspondence address below
Name		ANTONELLI, TERRY, STOUT & KRAUS, LLP		
Address				
City		State	Zip Code	
Country		Telephone	Fax	703-312-6666
Name		Paul J. SKWIERAWSKI		Registration No. (Attorney/Agent)
Signature		Date		02 March 2004

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known

Application Number	Unassigned
Filing Date	03 March 2004
First Named Inventor	Takashi OSHIMA et al.
Examiner Name	Unassigned
Group Art Unit	Unassigned
Attorney Docket No.	520.43569X00

TOTAL AMOUNT OF PAYMENT (\$770.00)

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge

DEFICIENCIES indicated to:

Deposit Account Number 01-2135

Deposit Account Name ATS&K

- ☒ Charge Any Additional Fee Required

Under 37 CFR 1.16 and 1.17

- ☐ Applicant Claims small entity status.

See 37 CFR 1.27

2. ☒ Payment Enclosed:

☐ Check ☒ Credit Card ☐ Money Order ☐ Other

FEE CALCULATION

2. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Entity Fee Code	Fee Description	Fee Paid
1001	770	2001	385 Utility filing fee	
1002	340	2002	170 Design filing fee	
1003	530	2003	265 Plant filing fee	
1004	770	2004	385 Reissue filing fee	
1005	160	2005	80 Provisional filing fee	
SUBTOTAL (1)				\$770.00

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
12-20**	= 00	x\$18	= \$00
Indep. Claims	3-3**	= 00	x\$ 86 = \$00
Multiple Dependent			=

Large Fee Code	Entity Fee (\$)	Small Entity Fee Code	Fee Description
1201	18	2201	9 Claims in excess of 20
1202	86	2202	43 Independent claims in excess of 3
1203	290	2203	145 Multiple dependent claim, if not paid
1204	86	2204	43 ** Reissue independent claims over original patent
1205	18	2205	9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) \$00			


**or number previously paid, if greater; For Reissues, see above.

FEE CALCULATION (continued)

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Fee Description	Fee Paid
105	130	205	65 Surcharge - late filing fee or oath	
127	50	227	25 Surcharge - late provisional filing fee or cover sheet	
139	130	139	130 Non-English specification	
147	2,520	147	2,520 For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examination action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	400	216	200 Extension for reply within second month	
117	920	217	460 Extension for reply within third month	
118	1,440	218	720 Extension for reply within fourth month	
128	1,960	228	980 Extension for reply within fifth month	
119	320	219	160 Notice of Appeal	
120	320	220	160 Filing a brief in support of an appeal	
121	280	221	140 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,280	241	640 Petition to revive - unintentional	
142	1,280	242	640 Utility issue fee (or reissue)	
143	460	243	230 Design issue fee	
144	620	244	310 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Processing fee under 37 CFR 1.17(q)	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	740	246	370 For each additional invention to be examined (37 CFR § 1.129(a))	
149	740	249	370 For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	
Other fee (specify)				
*Reduced by Basic Filing Fee Paid				
SUBTOTAL (3) (\$00)				

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Paul J. SKWIERAWSKI	Registration No. (Attorney/Agent)	32,173	Telephone	703-312-6600
Signature				Date	02 March 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.